

FEE SUMMARY SHEET

Transmittal -- Amendment

Date:

November 15, 2005

Time:

1:20 PM

Docket:

04303/100N160-US1

Filing Date:

August 3, 2001

Application No:

09/922,484

Total Fee:

\$ 450.00

Code Amount 37 CFR Listed on Fee Description

1252

450.00 1.17(a)(2) Extension for response within second month

Fee Transmittal (PTO SB-17)

PTO/SB/22 (12-04)

A TOURS					
MATRADE	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collectic PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 04303/100N160-US1		
	Application Number	09/922,484-Conf.	#7277	Filed	August 3, 2001
	For DYNAMICALLY RECONFI	GURABLE UNIVER	RSAL TRANSMITT	TER SYSTEM	
	Art Unit 2685			Examiner	L. N. Le
	This is a request under the provisi identified application.	ons of 37 CFR 1.13	36(a) to extend the	period for filing a r	reply in the above
	The requested extension and fee	are as follows (che	ck time period desi		
	One month (37 CFR 1	.17(a)(1))	<u>Fee</u> \$120	Small Entity Fe \$60	<u>\$</u>
	X Two months (37 CFR	1.17(a)(2))	\$450	\$225	\$ 450.00
	Three months (37 CF	R 1.17(a)(3))	\$1020	\$510	\$
	Four months (37 CFR	1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR	1.17(a)(5))	\$2160	\$1080	\$
	A check in the amount of the Payment by credit card. For The Director has already be	orm PTO-2038 is at	ttached.		
-	X The Director is hereby auth	orized to charge ar	ny fees which may	be required, or cre	· edit any overpayment,
	The Director is hereby auth Deposit Account Number I am the applicant/in assignee of	orized to charge an 04-0100 ventor.	ny fees which may I have encl	be required, or creosed a duplicate of CFR 3.71.	edit any overpayment, opy of this sheet.
	The Director is hereby authorized Deposit Account Number I am the applicant/in assignee of Statement	orized to charge ar 04-0100 ventor.	ny fees which may I have encl e interest. See 37	be required, or creosed a duplicate co	edit any overpayment, opy of this sheet.
	The Director is hereby authorized Deposit Account Number I am the applicant/in assignee of Stateme attorney or attorney or	orized to charge ar 04-0100 ventor. record of the entire ent under 37 CFR 3	ny fees which may I have encl e interest. See 37 3.73(b) is enclosed egistration Numbe	be required, or creosed a duplicate co	edit any overpayment, opy of this sheet.
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	The Director is hereby authorized peposit Account Number I am the applicant/in assignee of Stateme attorney or attorney or Registration attorney or Registration attorney or Signatures of all the inventors or a signatures of all the inventors or a signature of a s	orized to charge an 04-0100 ventor. record of the entire ent under 37 CFR 3 agent of record. Ragent under 37 CF on number if acting urgnature C. Brutman printed name	e interest. See 37 3.73(b) is enclosed egistration Number R 1.34.	be required, or creosed a duplicate of CFR 3.71. I. (Form PTO/SB/9 38,395 Nover	mber 15, 2005 Date 2) 527-7664 Shone Number
8/2005 MBE	The Director is hereby authorized peposit Account Number I am the applicant/in assignee of Stateme attorney or attorney or Registration Si Laura Typed or NOTE: Signatures of all the inventors or a than one signature is required, see below. Total of 1	orized to charge an 04-0100 ventor. record of the entire ent under 37 CFR 3 agent of record. R agent under 37 CF on number if acting urgnature C. Brutman printed name ssigness of record of the control of the contr	e interest. See 37 3.73(b) is enclosed egistration Number R 1.34.	be required, or creosed a duplicate of CFR 3.71. I. (Form PTO/SB/9 38,395 Nover	mber 15, 2005 Date 2) 527-7664 Shone Number

NOV 1 5 2005

PTO/SB/17 (12-04v2)

Under the Paperwork Re	duction Act of 1995	no nerson are requi	red to res	U.S. Patent	and Tradem	oved for use throug ark Office; U.S. DE	PARTMENT C	F COMMERCE
1		·	100 10103	porta to a concettor		plete if Know		CONTROL NUMBER
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005			818). /			09/922,484-C	onf. #7277	
						August 3, 200	01	
				First Named Inventor Joel D. Medlock		ck		
			E	Examiner Name L. N. Le		N. Le	.е	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2685				
TOTAL AMOUNT OF PAYMENT (\$) 450.00				Attomey Docket	No.	04303/100N160-US1		
METHOD OF PAYMENT (check all that apply)								
x Check Credi	t Card M	Ioney Order	None	Other (olease ident	 ify):		
Deposit Account D	eposit Account Numb	er: <u>04-0100</u> Depo	osit Accour	nt Name:	D	arby & Darby	P.C.	
For the above-ide	entified deposit a	account, the Dire	ctor is h	ereby authorize	d to: (chec	k all that apply)		
l [(s) indicated bel					icated below, e		e filing fee
X Charge any	additional fee(s	s) or underpayme	ent of	x Credit	any overpa	yments		
FEE CALCULATION	51 31 UFK 1.10	211U 1.1/		_ _				
1. BASIC FILING, SEAR	CH. AND EXAM	INATION FEES						
		G FEES	SEAF	RCH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100	1 663 F	aiu (#)
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0	-	
2. EXCESS CLAIM FEES			•		-	-		Small Entity
Fee Description	_						Fee (\$)	Fee (\$)
Each claim over 20 (incl	Each claim over 20 (including Reissues) 50 25							25
Each independent claim	-	g Reissues)					200	100
Multiple dependent clair	ns						360	180
		ee (\$)	Fee Pai	id (\$)	Mt	ıltiple Depend		
38 =	× _	=			<u>Fe</u>	<u>e (\$)</u>	Fee Paid (\$	1
Indep. Claims Ext	ra Claims F	ee (\$)	Fee Pai	id (\$)				-
55=	× _	=						
3. APPLICATION SIZE			,					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets		-	litional 50 or frac	tion thereo	f <u>Fee (\$)</u>	Fee F	Paid (\$)
100 = /50 (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00								
SUBMITTED BY								
Signature	une (' Dun		egistration No. Attorney/Agent)	38,395	Telephone	(212) 52	7-7664
Name (Print/Type) Laura	C. Brutman		7			Date	November	15, 2005

Express Mail Label No.	Dated:		
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